



**STATE OF TENNESSEE**  
**DEPARTMENT OF HEALTH**  
**BUREAU OF HEALTH LICENSURE AND REGULATION**  
**DIVISION OF EMERGENCY MEDICAL SERVICES**  
227 FRENCH LANDING, SUITE 303,  
HERITAGE PLACE METROCENTER  
NASHVILLE, TN 37243  
(615) 741-2584

STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

1. Name of Board, Committee or Council:

**Tennessee Emergency Medical Services Board**

2. Rulemaking hearing date: November 21, 2006  
Amendments to Rules 1200-12-1-.04 Emergency Medical Technician and 1200-12-1-.12 Authorization of EMT and EMT-Paramedic Instructor/Coordinators

3. Types of small businesses that will be directly affected by the proposed rules:

Providers of classroom and clinical training for licensed EMS personnel will be affected. At the current time, these training facilities are only located in post-secondary State community colleges/universities under the Tennessee Board of Regents system, or under the fire service academies of major municipalities. These training facilities participated in the development and support the proposed amendments to the rules.

4. Types of small businesses that will bear the cost of the proposed rules:  
Educational providers will bear the cost of the requirements, but these compare favorably with other academic and clinical training standards for healthcare professions.

5. Types of small businesses that will directly benefit from the proposed rules:  
Schools and training facilities will have a more specific standard for the credentials of the training personnel and the responsibilities that may be assigned by level of training, licensure, and experience.

6. Description of how small business will be adversely impacted by the proposed rules:  
For some schools, this rule will require additional educational qualifications for instructors or additional or more experienced personnel to supervise clinical training and practice.

7. Alternatives to the proposed rule that will accomplish the same objectives but are less burdensome, and why they are not being proposed:  
The Board does not recognize any less burdensome requirements. These objectives are consistent to recognize that more qualified instructors will improve the quality of training for emergency medical technicians and EMT-Paramedics.

8. Comparison of the proposed rule with federal or state counterparts:

The board is not aware of any federal counterparts of the proposed rule. Several of the national accreditation organizations for health professions and other health-related license boards have similar requirements for the provision and supervision of classroom instruction and clinical practice.

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